| · Complete and send | this form, together w | applicable fee(s), to: Mail | | Mail Stop ISS Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 | | |
|---|--|--|--|---|--|---|
| 1 | SEP 1 6 2004 | O | · <u>Fax</u> | Alexandria, Virg | ginia 22313-1450 | |
| INSTRUCTIONS: This for appropriate. All further co- indicated unless corrected maintenance fee notificatio | orm should be used for tran trespondence including the below or directed offerwise ns. 2 & TRAD | smitting the ISSUE FEE and Patent, advance orders and no in Block 1, by (a) specifying | PUBLIC prification g a new c | | ired). Blocks 1 through will be mailed to the curry; and/or (b) indicating a s | 4 should be completed where ent correspondence address as eparate "FEE ADDRESS" for |
| CURRENT CORRESPONDEN | n with any corrections or use Block 1) | | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, much ave its own certificate of mailing or transmission. | | | |
| MILLS & ONEL ELEVEN BEACO SUITE 605 BOSTON, MA 02 | | | Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below. | | | |
| • | | | Vanessa Marakas | | (Depositor's name) | |
| | | | | Valle | - Mena | (Signature) |
| Ý | | • | | L sep | tembes 14, | 3-00 (Date) |
| APPLICATION NO. | FILING DATE | FIRST NAM | ED INVEN | TOR | ATTORNEY DOCKET NO | CONFIRMATION NO. |
| 09/775,231 | 231 02/01/2001 Han-Sin Le | | Sin Lee | SAM-167 9048 | | |
| TITLE OF INVENTION: T | RENCH ISOLATION MET | HOD | | | | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | | TOTAL FEE(S) DUE | DATE DUE |
| nonprovisional | NO | \$1330 | | \$300 | \$1630 | 09/30/2004 |
| EXAMINER | | ART UNIT | | ASS-SUBCLASS | | |
| POMPEY, RO | 2812 | 312 438-435000 | | | | |
| CFR 1.363). ☐ Change of correspond Address form PTO/SB/1 ☐ "Fee Address" indicat | ee address or indication of "Fe ence address (or Change of C 22) attached. ion (or "Fee Address" Indicat or more recent) attached. Use | Correspondence names of agents C firm (ha agent) a gent) a attorney. | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | |
| 3. ASSIGNEE NAME AND | RESIDENCE DATA TO B | E PRINTED ON THE PATEN | NT (print o | or type) | ···· | · · · · · · · · · · · · · · · · · · · |
| | an assignee is identified bel ed to the USPTO or is being s | ow, no assignee data will app submitted under separate cover | ear on the Complet | | | priate when an assignment has assignment. |
| Samsung Electronics Co., Ltd. Republic of Korea | | | | | | |
| Please check the appropriate | e assignee category or catego | ries (will not be printed on the | patent); | ☐ individual 🔞 d | corporation or other private | e group entity |
| 4a. The following fee(s) are | enclosed: | 4b. Payment o | of Fee(s): | | | |
| ☑ Issue Fee ☑ A check in the amount of the fee(s) is enclosed. | | | | | | |
| ☑ Publication Fee ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, the Director is hereby authorized by charge the required fee(s) and overpayment, the Director is hereby authorized by charge the required fee(s) are credit any overpayment, the Director is hereby authorized by charge the required fee(s) are credit any overpayment, the Director is hereby authorized by charge the required fee(s) are credit any overpayment, the Director is hereby authorized by charge the required fee(s) are credit any overpayment, the Director is hereby authorized by charge the required fee(s) are credit any overpayment, the Director is hereby authorized by charge the required fee(s) are credit any overpayment, the Director is hereby authorized by charge the required fee(s) are credit any overpayment, the Director is hereby authorized by charge the required fee(s) are credit any overpayment. | | | | | | |
| ☑ Advance Order - # of | Copies | The Dir Deposit Ac | ector is he ecount Nu | ereby authorized by cl mber | narge the required fee(s), (enclose an extr | or credit any overpayment, to a copy of this form). |
| Director for Patents is reque | ested to apply the Issue Fee ar | nd Publication Fee (if any) or t | | | | |
| interest as shown by the re | d Publication Fee (if require a registered attorney or age cords of the United States Pa | (Date) 38,572 Septime and will not be accepted from ent; or the assignee or other tent and Trademark Office. | party in | 1 | ECKLU2 00000005 09775 | |
| Under the Paperwork Re | | persons are required to respo | | 01 FC:1501 02 FC:8001 03 FC:1504 | • | 1330.00 GP 30.00 GP 300.00 GP |

Customer No.: 29344



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s):

Han-Sin Lee, et al.

U.S. Serial No.:

09/775,231

Filing Date:

February 1, 2001

Examiner:

Pompey, Ron E.

Group Art Unit:

2812

Date of Notice of Allowance:

June 30, 2004

Title:

TRENCH ISOLATION METHOD

CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8

I hereby certify that this correspondence is being deposited with the United States Post Office as First Class Mail on the date indicated below in an envelope addressed to Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450,

Mail Stop Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

TRANSMITTAL LETTER

Sir:

Enclosed herewith for filing in the above-identified patent application please find the following:

- Fee(s) Transmittal PTOL-85; 1.
- Check in the amount of \$1,660.00 to cover Issue Fee, ten (10) advance-order copies of the 2. printed patent and the Publication Fee; and
- Return Postcard 3.

In connection with the foregoing matter, please charge any additional fees which may be due, or credit any overpayment, to Deposit Account Number 50-1798. A duplicate copy of this letter is provided for this purpose.

Respectfully submitted,

Mills & Onello, LLP

Eleven Beacon Street, Suite 605

Boston, MA 02108

Telephone: (617) 994-4900 Facsimile: (617) 742-7774

J:\SAM\0167\ifee\transissuefee.wpd

Anthony P. Onello, Jr.

Registration Number 38,572 Attorney for Applicant